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	Under the Peperwork Re	eduction Act of 1995, no pers	cons are required to respo	and to	e collection of Inf	ometion unle		sys a vedd OMB		
	PATEN	RECORD		Application or Doctus Number 09/206, 782						
·	CLAIMS AS FILED - PART I (Column 1) (Column 2)			_	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY		
	FOR	NUMBER FILED	NUMBER EXTRA		RATE	FEE		RATE .	FEE	
	BASIC FEE (37 CFR 1.16(a))	1.00 E 30 E				·	OR		s	
	TOTAL CLAIMS (37 CFR 1.18(c))	minus 20 =	•	7	x \$•		OR	X \$=		
	INDEPENDENT CLAIMS (37 CFR 1.18(b))	minus 20 =	•	7	x s=		OR .	x s		1
	MULTIPLE DEPENDENT C	LAIM PRESENT (37 CF	FR 1.16(d))	7	+=		OR.	+s =		
	* If the difference in colum		TOTAL		OR	TOTAL	:			
	CLAIM	AS AS AMENDED - P	ART II	í			-			
			(Column 2) (Column 3		SMALL E	NTITY	OR	OTHER SMALL	RTHAN	
1/4	<b>&lt; Region R</b>	EMAINING AFTER PR	(IGHEST (UMBER PRESENT EVIOUSLY AID FOR EXTRA	7	RATE	ADDI- TIONAL FEE		RATE	ADOI- TIONAL FEE	
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'(''	Z Independent GP GFR 1.16(b)	2 Minus ***	5 11	J·	x \$		OR	x s=		·
	FIRST PRESENTATION	OF MALTPLE DEPONDENT O	LAIM (37 CFR 1.16(d))		+5	/	OR	+s		İ
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<b>4</b> 1	. (0	olumn 1)	(Column 2) (Column 3	<u>)</u>					<u>.</u> .,	
Å,	E RE	MAINING AFTER PR	IIGHEST IUMBER PRESENT EVICUSLY EXTRA AED FOR	•	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
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<u> </u>	Z Independent (U *CST CFR 1:16(b))*-	Minus	-		-x s	<del>/</del>	OR:	'y' \$	-	
	FIRST PRESENTATION	OF MULTIPLE DEPENDENT O	LASM - (37 CFR 1.16(d))	7	+, :::· <sub>4</sub> /		OR			
		`		_	TOTAL / ADO'L FEE		OR OR	TOTAL MOD'L FEE		
			Column 2) (Column 3	<u>}</u>						
	O PE	MAINING N	IGHEST IUMBER PRESENT EVIOUSLY EXTRA AID FOR		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL	
3	Total .	Minus **			× \$		OR T	x \$=		-
	Total (07 GPR 1.18(d)  Z Independent (17 GPR 1.18(b))	Minus ***	•	1	x \$=		OR	x \$=	i .	٠.
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						OR	rsit. + s <u>rr</u> am		
		· · · · · · · · · · · · · · · · · · ·			TOTAL ADO'L FEE		OR	TOTAL ADD'L FEE		

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\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of Information is required by 37 CFR 1.16. The Information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form end/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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